

United States Bankruptcy Court
Eastern District of Virginia

In re **Bruno A. Tarabocchia,**
Sarah C. Tarabocchia

Debtors

Case No. **15-31174**

Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	196,000.00		
B - Personal Property	Yes	3	44,418.64		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	3		223,501.56	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	14		53,905.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,316.53
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,066.53
Total Number of Sheets of ALL Schedules		31			
Total Assets			240,418.64		
Total Liabilities				277,406.56	

United States Bankruptcy Court
Eastern District of Virginia

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Debtors

Case No. 15-31174

Chapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	31,461.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	31,461.00

State the following:

Average Income (from Schedule I, Line 12)	5,316.53
Average Expenses (from Schedule J, Line 22)	5,066.53
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	8,000.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		18,852.65
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		53,905.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		72,757.65

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000	Tenants by the Entireties	J	196,000.00	214,852.65

Sub-Total > **196,000.00** (Total of this page)

Total > **196,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		Cash - Approx.	J	50.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		PNC Checking Account - \$2,700 Approx. Paypal Account - \$0 Approx. Barclays Savings Account - \$0.00 Approx. Barclays Savings Account - \$4.00 Approx. Barclays Savings Account - \$81.00 Approx. Barclays Savings Account - \$41.00 Approx.	J	2,826.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household Goods	J	1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothes	J	700.00
7. Furs and jewelry.		Wedding and Engagement Rings \$600.00 Misc. Jewelry \$1,500	W	2,100.00
8. Firearms and sports, photographic, and other hobby equipment.		Camcorder, Digital camera	J	150.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Employer Term Life Insurance policy NO Cash Value	H	0.00
10. Annuities. Itemize and name each issuer.	X			
Sub-Total > (Total of this page)				7,326.00

2 continuation sheets attached to the Schedule of Personal Property

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Hoffman & Hoffman 401K Dec. 31, 2014	H	22,297.64
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Potential slip and fall action involving Sarah Tarabocchia and Double Tree in November 2013.	J	Unknown

Sub-Total > **22,297.64**
(Total of this page)

Sheet 1 of 2 continuation sheets attached
to the Schedule of Personal Property

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2005 Chevrolet Suburban 1500 164,600 miles NO LIENS	J	5,295.00
		2008 Chrysler 300 Touring 130,500 miles PAY DIRECT	H	9,450.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	Dog		J	50.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > **14,795.00**
(Total of this page)
Total > **44,418.64**

Sheet **2** of **2** continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)☒ 11 U.S.C. §522(b)(3)☐ Check if debtor claims a homestead exemption that exceeds

\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Husband's Exemptions			
Real Property			
Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000	Va. Code Ann. § 34-4	1.00	196,000.00
Checking, Savings, or Other Financial Accounts, Certificates of Deposit			
PNC Checking Account - \$2,700 Approx.	Va. Code Ann. § 34-29	5,111.75	2,826.00
Paypal Account - \$0 Approx.			
Barclays Savings Account - \$0.00 Approx.			
Barclays Savings Account - \$4.00 Approx.			
Barclays Savings Account - \$81.00 Approx.			
Barclays Savings Account - \$41.00 Approx.			
Household Goods and Furnishings			
Household Goods	Va. Code Ann. § 34-26(4a)	750.00	1,500.00
Wearing Apparel			
Clothes	Va. Code Ann. § 34-26(4)	350.00	700.00
Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans			
Hoffman & Hoffman 401K Dec. 31, 2014	Va. Code Ann. § 34-34	22,297.64	22,297.64
Automobiles, Trucks, Trailers, and Other Vehicles			
2005 Chevrolet Suburban 1500 164,600 miles NO LIENS	Va. Code Ann. § 34-26(8)	2,647.50	5,295.00
2008 Chrysler 300 Touring 130,500 miles PAY DIRECT	Va. Code Ann. § 34-4	1.00	9,450.00
Animals			
Dog	Va. Code Ann. § 34-26(5)	25.00	50.00

Total: **31,183.89** **238,118.64**

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Wife's Exemptions</u>			
<u>Real Property</u>			
Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000	Va. Code Ann. § 34-4	1.00	196,000.00
<u>Household Goods and Furnishings</u>			
Household Goods	Va. Code Ann. § 34-26(4a)	750.00	1,500.00
<u>Wearing Apparel</u>			
Clothes	Va. Code Ann. § 34-26(4)	350.00	700.00
<u>Furs and Jewelry</u>			
Wedding and Engagement Rings \$600.00 Misc. Jewelry \$1,500	Va. Code Ann. § 34-26(1a)	600.00	2,100.00
<u>Other Contingent and Unliquidated Claims of Every Nature</u>			
Potential slip and fall action involving Sarah Tarabocchia and Double Tree in November 2013.	Va. Code Ann. § 34-4 100% of Fair Market Value not to exceed exemption limits Va. Code Ann. § 34-28.1 100% of Fair Market Value not to exceed exemption limits	Unknown Unknown	Unknown
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
2005 Chevrolet Suburban 1500 164,600 miles NO LIENS	Va. Code Ann. § 34-26(8)	2,647.50	5,295.00
<u>Animals</u>			
Dog	Va. Code Ann. § 34-26(5)	25.00	50.00

Total:

4,373.50

205,645.00

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. 15-31174

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx7898			Opened 12/01/00 Last Active 2/01/12 Judgment Lien Disputed Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000 Value \$ 196,000.00			X	0.00	0.00
Argent Federal Credit 11651 Alliance Circle Chester, VA 23831	J							
Account No.								
Edward S. Whitlock 10160 Staples Mill Road Suite 105 Glen Allen, VA 23060			Collection agency: Argent Federal Credit Value \$				Notice Only	
Account No. xxxxxxxxx1587			Opened 4/01/12 Last Active 1/30/15 Title 2008 Chrysler 300 Touring 130,500 miles PAY DIRECT Value \$ 9,450.00				8,648.91	0.00
Capital One Auto Finance 3901 Dallas Pkwy Plano, TX 75093	H							
Account No.								
Capital One Auto Finance 3905 N Dallas Pkwy Plano, TX 75093			Collection agency: Capital One Auto Finance Value \$				Notice Only	
Subtotal (Total of this page)							8,648.91	0.00

2 continuation sheets attached

B6D (Official Form 6D) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
			DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No. 1156, 4329			2010; tax year 2009 Federal Tax Lien 10/13/2011 Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000				5,829.95	5,829.95
Internal Revenue Service Centralized Insolvency Unit P O Box 7346 Philadelphia, PA 19101-7346		J						
			Value \$ 196,000.00					
Account No. xxxxxxxxxxxx1998			Opened 4/01/07 Last Active 11/29/13 Deed of Trust Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000				63,438.00	13,022.70
Wells Fargo Bank Nv Na Po Box 31557 Billings, MT 59107		H						
			Value \$ 196,000.00					
Account No.			Collection agency: Wells Fargo Bank Nv Na				Notice Only	
Wells Fargo Bank Nv Na Attn: Deposits Bankruptcy MAC# P6103-05K Po Box 3908 Portland, OR 97208								
			Value \$					
Account No. xxxxxxxxxx1809			Opened 7/01/12 Last Active 3/01/14 Deed of Trust Location: 9916 Loch Banif Road, North Chesterfield VA 23236 Current Market Analysis - 196,000 October 2014 Tax Assessment - \$225,600 Zillow Range - \$214,000 - \$236,000				145,584.70	0.00
Wells Fargo Hm Mortgage 8480 Stagecoach Cir Frederick, MD 21701		H						
			Value \$ 196,000.00					
Account No.			Collection agency: Wells Fargo Hm Mortgage				Notice Only	
Shapiro & Brown, LLP 10021 Balls Ford Rd Ste 200 Manassas, VA 20109								
			Value \$					
Subtotal							214,852.65	18,852.65
(Total of this page)								

Sheet **1** of **2** continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Shapiro & Brown, LLP 236 Clearfield Ave Ste 215 Virginia Beach, VA 23462			Collection agency: Wells Fargo Hm Mortgage Value \$				Notice Only	
Account No. 			 Value \$					
Account No. 			 Value \$					
Account No. 			 Value \$					
Account No. 			 Value \$					
<div style="display: flex; justify-content: space-between;"> <div> Sheet 2 of 2 continuation sheets attached to Schedule of Creditors Holding Secured Claims </div> <div> Subtotal (Total of this page) Total (Report on Summary of Schedules) </div> </div>							0.00 223,501.56	0.00 18,852.65

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.			2009 - 2012					
Chesterfield County - PP Taxes Richard A. Cordle, Treasurer Post Office Box 26585 Richmond, VA 23285-0088		J	Business personal property taxes. Debtor was not in business for those years.			X		0.00
							0.00	0.00
Account No.			Tax year??? Notice????					
Commonwealth of VA-Tax P.O. Box 2156 Richmond, VA 23218-2156		J						0.00
							0.00	0.00
Account No.			Tax year??? Notice????					
Internal Revenue Service Centralized Insolvency Unit P O Box 7346 Philadelphia, PA 19101-7346		J						0.00
							0.00	0.00
Account No.								
Account No.								

Sheet **1** of **1** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

Total
(Report on Summary of Schedules)

0.00	0.00
0.00	0.00

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxx0344 Advance Orthopaedic Centers 7858 Shrader Rd Henrico, VA 23294	H	10/4/2010 Medical				258.00
Account No. x1007 American Express P.o. Box 981537 El Paso, TX 79998	W	Opened 4/23/07 Last Active 2/04/09 Credit Card				7,140.00
Account No. American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355		Collection agency: American Express				Notice Only
Account No. xxxxxxxxxxxx6239 Argent Federal Credit 5403 Jefferson Davis Hwy Richmond, VA 23234	J	Opened 4/30/01 Last Active 10/01/11 Credit Card \$5,122 - Paid in Full			X	0.00
Subtotal (Total of this page)						7,398.00

13 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Lafayette, Ayers & Witlock 10160 Staples Mill Road Suite 105 Glen Allen, VA 23060		Collection agency: Argent Federal Credit				Notice Only
Account No.						
BB&T Collections Support Unit Post Office Box 2322 Lumberton, NC 28359	J	2014 Overdrawn account				1,082.00
Account No.						
Professional Recovery Con PO Box 51187 Durham, NC 27717		Collection agency: BB&T				Notice Only
Account No. xxxx-x1628						
Bob Blake Appraisal Co 2070 Moseley Rd Moseley, VA 23120	J	Account balance				500.00
Account No. xxxxxxxxxxxx7804						
Capital 1 Bank Po Box 85520 Richmond, VA 23285	H	Opened 12/01/11 Last Active 8/30/13 Credit Card				675.00
Sheet no. 1 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						2,257.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						Notice Only
Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130		Collection agency: Capital 1 Bank				
Account No. xxx*x0562		3/30/2012 Medical				150.00
Dr. Robert P. Castellucci, MD PO Box 247 Midlothian, VA 23113	W					
Account No.						Notice Only
Credit Adjustment Board 8002 Discovery Drive Ste 311 Henrico, VA 23229		Collection agency: Dr. Robert P. Castellucci, MD				
Account No. 1156		Medical				27.00
Chesterfield Imaging Center P.O. Box 13342 Richmond, VA 23225	H					
Account No.						Notice Only
Credit Adjument Board 306 East Grace St Richmond, VA 23219		Collection agency: Chesterfield Imaging Center				
Sheet no. 2 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						177.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx6322 Chippenham Hospital, Inc. 7101 Jahnke Road Richmond, VA 23225	W	Medical				1,128.00
Account No. xxxxxxx7654 CJW Medical Center P. O. Box 99400 Louisville, KY 40269	W	11/10/2013 Medical				110.00
Account No. Focused Recovery 9701 Metropolitan Court Ste B Richmond, VA 23236		Collection agency: CJW Medical Center				Notice Only
Account No. xxxxxxx7654 CJW Medical Center P.O. Box 13620 Richmond, VA 23225	W	11/10/2013 Medical				1,852.00
Account No. xxxxxxx7654 CJW Medical Center PO Box 99587 Louisville, KY 40269	J	Medical				400.00
Sheet no. 3 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 3,490.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 3582 Comenity Capital Bank PO Box 182025 Columbus, OH 43218	J	Account balance				3,096.00
Account No. ARS National Services Inc PO Box 469046 Escondido, CA 92046		Collection agency: Comenity Capital Bank				Notice Only
Account No. xxxxxxxxxxxx3064 Dermatology Assoc. of VA 10710 Midlothian Turnpike #401 Richmond, VA 23235	W	Opened 7/01/13 Last Active 11/01/12 Medical				585.00
Account No. Credit Adjustment Board 306 East Grace Street Richmond, VA 23219		Collection agency: Dermatology Assoc. of VA				Notice Only
Account No. Dermatology Assoc of VA 301 Concourse Blvd Ste 190 Glen Allen, VA 23059		Collection agency: Dermatology Assoc. of VA				Notice Only
Sheet no. 4 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 3,681.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
Receivable Management PO Box 8630 Richmond, VA 23226			Collection agency: Dermatology Assoc. of VA			Notice Only
Account No.						
FIA Card Services PO Box 15019 Wilmington, DE 19850		H	Non-suit 2010		X	Unknown
Account No.						
Glasser & Glasser, P.L.C. P. O. Box 3400 Norfolk, VA 23514			Collection agency: FIA Card Services			Notice Only
Account No. xxxx3386						
Lab Corp P.O. Box 2240 Burlington, NC 27216		J	4/17/2012 Medical			425.00
Account No.						
AMCA PO Box 1235 Elmsford, NY 10523			Collection agency: Lab Corp			Notice Only
Sheet no. 5 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						425.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Credit Collection Services Two Wells Ave Newton Center, MA 02459		Collection agency: Lab Corp				Notice Only
Account No. xxxx0911		12/3/2012 Medical				
OrthoVirginia West End Orthopaedic Clinic P.O. Box 35725 Richmond, VA 23235	W					492.00
Account No. xxxx9165		District Of Columbia Govt Ticket				
Professnl Acct Mgmt In 633 W Wisconsin Av Milwaukee, WI 53203	H					100.00
Account No.						
Professnl Acct Mgmt In Pam Po Box 391 Milwaukee, WI 53201		Collection agency: Professnl Acct Mgmt In				Notice Only
Account No. xxxxxxx2286		5/25/2012 Medical				
Radiology Assoc of Richmond 2602 Buford Rd Richmond, VA 23235	H					50.00
Sheet no. 6 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						642.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Credit Adjustment Board 306 East Grace Street Richmond, VA 23219		Collection agency: Radiology Assoc of Richmond				Notice Only
Account No. xxx6322 Radiology Assoc of Richmond PO Box 13343 Richmond, VA 23225	W	11/10/2013 Medical				16.00
Account No. B. Thomas Reams, MD 2229 Magnolia Grove Way Midlothian, VA 23113	W	Medical				77.00
Account No. xxx5318 St Francis Emergency Assoc PO Box 79214 Baltimore, MD 21279-0214	H	Opened 3/01/10 Last Active 6/01/08 Medical				299.00
Account No. Focus Recovery Solutions Attn: Bankruptcy 9701 Metropolitan Court Ste B Richmond, VA 23236		Collection agency: St Francis Emergency Assoc				Notice Only
Sheet no. 7 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 392.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. St Francis Medical Center P.O. Box 404893 Atlanta, GA 30384	W	10/27/2011 Medical				884.00
Account No. BCC Financial Managment PO Box 590067 Fort Lauderdale, FL 33359		Collection agency: St Francis Medical Center				Notice Only
Account No. Bon Secours P.O. Box 28538 Richmond, VA 23228		Collection agency: St Francis Medical Center				Notice Only
Account No. Horizon Financial Management 8585 S. Broadway Suite 880 Merrillville, IN 46410		Collection agency: St Francis Medical Center				Notice Only
Account No. St Francis Medical Center P.O. Box 404893 Atlanta, GA 30384	W	Medical				100.00
Sheet no. 8 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 984.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Professional Emerg Care 2987 Momentum Pl Chicago, IL 60689		Collection agency: St Francis Medical Center				Notice Only
Account No.						
Spinella, Owings & Shaia 8550 Mayland Drive Richmond, VA 23294-4704		Collection agency: St Francis Medical Center				Notice Only
Account No.						
St Francis Medical Center P.O. Box 404893 Atlanta, GA 30384	H	9/30/2008 & 1/29/2009 Medical				1,080.00
Account No.						
MiraMed Revenue Group PO Box 404893 Atlanta, GA 30384		Collection agency: St Francis Medical Center				Notice Only
Account No. xxxxxxxxxxxxxxxxx0703						
Texas Guaranteed Loan PO Box 83100 Round Rock, TX 78683	J	Opened 3/01/10 Last Active 5/31/10 Educational - No Ch 13 payment				3,284.00
Sheet no. 9 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						4,364.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.			Collection agency: Texas Guaranteed Loan				Notice Only
Colorado Student Loa/College Assist 3015 S. Parker Rd, Ste 425 Aurora, CO 80014							
Account No.			Collection agency: Texas Guaranteed Loan				Notice Only
Tx Guar Std Tg/Attn. Bankruptcy Department Po Box 659602 San Antonio, TX 78265							
Account No. xxxxxxxxxxxxxxxxxxxx0704		J	Opened 3/01/10 Last Active 5/31/10 Educational - No Ch 13 payment				28,177.00
Texas Guaranteed Student Loan 1609 Centre Creek Drive Austin, TX 78761							
Account No.			Collection agency: Texas Guaranteed Student Loan				Notice Only
Tx Guar Std Tg/Attn. Bankruptcy Department Po Box 659602 San Antonio, TX 78265							
Account No.			Collection agency: Texas Guaranteed Student Loan				Notice Only
Van Ru Credit Corp 11745 W Bradley Rd Milwaukee, WI 53224							
Sheet no. <u>10</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							28,177.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxx0204 Verizon P.O. Box 3397 Wilmington, IL 61702	H	Opened 10/01/11 Service				383.00
Account No. Midland Credit Mgmt In 8875 Aero Dr San Diego, CA 92123		Collection agency: Verizon				Notice Only
Account No. xxxxxxxxxx0001 Verizon 500 Technology Dr Ste 30 Weldon Spring, MO 63304	W	Opened 12/01/12 Last Active 6/23/14 Agriculture				524.00
Account No. Midland Cred 8875 Aero Dr Suite 200 San Diego, CA 92123		Collection agency: Verizon				Notice Only
Account No. xxxx4057 Verizon Wireless Post Office Box 17464 Baltimore, MD 21297-1464	H	Opened 12/01/13 Last Active 12/01/10 Service				181.00
Sheet no. 11 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,088.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Pinnacle Credit Service Attn: Bankruptcy Po Box 640 Hopkins, MN 55343		Collection agency: Verizon Wireless				Notice Only
Account No.						
RMCB 4 Westchester Plaza Ste 110 Elmsford, NY 10523		Collection agency: Verizon Wireless				Notice Only
Account No. xx0003		Medical				
Virginia Emer Phys LLP 75 Remittance Drive Ste 1151 Chicago, IL 60675	W					419.00
Account No. xxx2850		11/10/2013 Medical				
Virginia Emergency Phys LLP 75 Remittance Drive Ste 1151 Chicago, IL 60675	W					127.00
Account No. xxx0298		Medical				
Virginia Eye Institute 400 Westhampton Station Richmond, VA 23226	H					284.00
Sheet no. 12 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						830.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
Focused Reovery Solutions 9701 Metropolitan Court Ste B Richmond, VA 23236		Collection agency: Virginia Eye Institute				Notice Only
Account No.						
Account No.						
Account No.						
Account No.						
Account No.						
Sheet no. 13 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						0.00
Subtotal (Total of this page)						
Total (Report on Summary of Schedules)						53,905.00

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

AT&T

Cell phone contract

In re **Bruno A. Tarabocchia,
Sarah C. Tarabocchia**

Case No. **15-31174**

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

Fill in this information to identify your case:

Debtor 1 Bruno A. Tarabocchia

Debtor 2 Sarah C. Tarabocchia
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 15-31174
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<p>1. Fill in your employment information.</p> <p>If you have more than one job, attach a separate page with information about additional employers.</p> <p>Include part-time, seasonal, or self-employed work.</p> <p>Occupation may include student or homemaker, if it applies.</p>	Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
	Occupation	<u>Sales</u>	
	Employer's name	<u>Hoffman & Hoffman Inc.</u>	
	Employer's address	<u>3816 Patterson St Greensboro, NC 27407</u>	
	How long employed there?	<u>November 2011</u>	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>8,000.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	+\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	\$ <u>8,000.00</u>	\$ <u>0.00</u>

Debtor 1 **Bruno A. Tarabocchia**
Debtor 2 **Sarah C. Tarabocchia**

Case number (if known) **15-31174**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 8,000.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 1,184.33	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 1,149.69	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: <u>Long term disability</u>	5h.+ \$ 70.40 +	\$ 0.00
<u>Short term disability</u>	\$ 40.98	\$ 0.00
<u>Supp life</u>	\$ 32.62	\$ 0.00
<u>Aflac insurance</u>	\$ 22.13	\$ 0.00
<u>Flexible spending account</u>	\$ 183.33	\$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 2,683.48	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 5,316.52	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: <u>NO Amortized tax refund -- Debtor owes IRS</u>	8h.+ \$ 0.01 +	\$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.01	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 5,316.53 + \$ 0.00 =	\$ 5,316.53
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 5,316.53	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 Bruno A. Tarabocchia

Debtor 2 Sarah C. Tarabocchia
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 15-31174
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

1/2001

☐ No
☒ Yes

Son

5/2002

☐ No
☒ Yes

Daughter

5/2004

☐ No
☒ Yes

☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,328.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 225.00

Debtor 1 **Bruno A. Tarabocchia**
Debtor 2 **Sarah C. Tarabocchia**

Case number (if known) **15-31174**

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	<u>300.00</u>
6b. Water, sewer, garbage collection	6b. \$	<u>45.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<u>302.00</u>
6d. Other. Specify: <u>Trash Pickup</u>	6d. \$	<u>20.00</u>
7. Food and housekeeping supplies	7. \$	<u>921.28</u>
8. Childcare and children's education costs	8. \$	<u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$	<u>244.00</u>
10. Personal care products and services	10. \$	<u>200.00</u>
11. Medical and dental expenses	11. \$	<u>100.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<u>541.25</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	<u>100.00</u>
14. Charitable contributions and religious donations	14. \$	<u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<u>0.00</u>
15b. Health insurance	15b. \$	<u>0.00</u>
15c. Vehicle insurance	15c. \$	<u>120.00</u>
15d. Other insurance. Specify: _____	15d. \$	<u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Personal Property Tax \$360/year</u>		
	16. \$	<u>30.00</u>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	<u>340.00</u>
17b. Car payments for Vehicle 2	17b. \$	<u>0.00</u>
17c. Other. Specify: <u>Misc. expenses</u>	17c. \$	<u>100.00</u>
17d. Other. Specify: <u>Vehicle upkeep 2005 & 2008</u>	17d. \$	<u>150.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$	<u>0.00</u>
19. Other payments you make to support others who do not live with you.	\$	<u>0.00</u>
Specify: _____		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	<u>0.00</u>
20b. Real estate taxes	20b. \$	<u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$	<u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$	<u>0.00</u>
21. Other: Specify: _____	21. +\$	<u>0.00</u>
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$	<u>5,066.53</u>
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<u>5,316.53</u>
23b. Copy your monthly expenses from line 22 above.	23b. -\$	<u>5,066.53</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	<u>250.00</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes.		
Explain: <div style="border: 1px solid black; padding: 5px; display: inline-block;">Debtors do not anticipate any changes to income or expenses except Sarah anticipates getting a teaching position in her at-home school co-op in March that will cover the cost of the Coop fees</div>		

United States Bankruptcy Court
Eastern District of VirginiaIn re **Bruno A. Tarabocchia**
Sarah C. Tarabocchia

Debtor(s)

Case No. **15-31174**Chapter **13****DECLARATION CONCERNING DEBTOR'S SCHEDULES**

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 33 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **February 18, 2015**Signature **/s/ Bruno A. Tarabocchia****Bruno A. Tarabocchia**

Debtor

Date **February 18, 2015**Signature **/s/ Sarah C. Tarabocchia****Sarah C. Tarabocchia**

Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Eastern District of Virginia

In re **Bruno A. Tarabocchia**
Sarah C. Tarabocchia

Debtor(s)

Case No. **15-31174**
Chapter **13**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$16,000.00	(H) 2015 YTD: Hoffman & Hoffman Inc. Feb. 27, 2015
\$96,878.16	(H) 2014: Hoffman & Hoffman Inc.
\$99,746.00	(J) 2013: 1040 Income Tax Return

2. Income other than from employment or operation of business

None
☒

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
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B7 (Official Form 7) (04/13)

2

3. Payments to creditors

None

☐

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Capital 1 Bank (Car) Po Box 85520 Richmond, VA 23285	Dec - Feb 2015 Monthly car payment \$340 x 3	\$1,020.00	\$675.00

None

☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None

☒

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None

☒

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	-------------------------	---------------------------------	--------------------------

None

☐

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
Argent Federal Credit Union 5403 Jefferson Davis Richmond, VA 23234	September 9, 2014	Garnishment

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B7 (Official Form 7) (04/13)

3

5. Repossessions, foreclosures and returns

- None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
Wells Fargo		Foreclosure scheduled for April 1, 2015. Cancelled due to filing petition on March 6, 2015

6. Assignments and receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

- None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
Commonwealth Chapel	Church	Monthly	\$500/year

8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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B7 (Official Form 7) (04/13)

4

9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
North Law Bar# 29672 5913 Harbour Park Drive Midlothian, VA 23112	November 2014 - February 2015	\$2,400 = \$469 costs + \$1,931 applied to atty fee Total: \$469 = USB Filing fee \$310// Abacus Credit Counseling \$25/ Debtor Education \$45 // Credit report \$68// /Homestead Clerk \$21

10. Other transfers

- None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
None		

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

- None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
BB&T Post Office Box 2322 Lumberton, NC 28359	Checking account	Closed by bank in March 2014 for negative balance

B7 (Official Form 7) (04/13)

5

12. Safe deposit boxes

None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None ☐ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

B7 (Official Form 7) (04/13)

6

- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

18. Nature, location and name of business

- None ☐ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Imago Dei Photography LLC	1156	14032 Steeplestone Drive Midlothian, VA 23113	Photography business	2006 - January 2009; business closed

- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
------	---------

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

- None ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
------------------	-------------------------

- None ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

B7 (Official Form 7) (04/13)

7

NAME	ADDRESS	DATES SERVICES RENDERED
None ■	c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.	

NAME	ADDRESS
None ■	d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
------------------	-------------

20. Inventories

None
■ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
-------------------	----------------------	---

None
■ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
-------------------	--

21. Current Partners, Officers, Directors and Shareholders

None
■ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
------------------	--------------------	------------------------

None
■ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
------------------	-------	---

22. Former partners, officers, directors and shareholders

None
■ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
------	---------	--------------------

None
■ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
------------------	-------	---------------------

23. Withdrawals from a partnership or distributions by a corporation

None
■ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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B7 (Official Form 7) (04/13)

8

24. Tax Consolidation Group.

None ☒ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None ☒ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date February 18, 2015

Signature /s/ Bruno A. Tarabocchia
Bruno A. Tarabocchia
Debtor

Date February 18, 2015

Signature /s/ Sarah C. Tarabocchia
Sarah C. Tarabocchia
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

**United States Bankruptcy Court
Eastern District of Virginia**

In re **Bruno A. Tarabocchia
Sarah C. Tarabocchia**

Debtor(s)

Case No. **15-31174**

Chapter **13**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

IN A CHAPTER 13 CASE

(for use in the Richmond Division only)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>5,000.00</u>
Prior to the filing of this statement I have received	\$	<u>1,931.00</u>
Balance Due	\$	<u>3,069.00</u>

2. \$ **310.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (*specify*)

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (*specify*)

5. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

- ☒ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. **\$2,400 = \$469 costs + \$1,931 applied to atty fee**
Total: \$469 = USB Filing fee \$310 // Abacus Credit Counseling \$25/ Debtor Education \$45 // Credit report \$68 // Homestead Clerk \$21

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, as required by Local Bankruptcy Rule 2016-1(C)(3).

7. I am electing to request compensation and reimbursement of expenses in this case:

a. ☒ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a).

b. ☐ By submitting applications for compensation in the manner set forth in Local Bankruptcy Rule 2016-1(C)(1)(c)(ii).

An attorney for the debtor that fails to make the election to request compensation pursuant to Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a) at the commencement of the case will be deemed to have elected to request compensation in the manner set forth within Local Bankruptcy Rule 2016-1(C)(1)(c)(ii).

CERTIFICATION

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 18, 2015*Date***/s/ Pia J. North****Pia J. North 29672***Signature of Attorney***North Law Bar# 29672***Name of Law Firm***5913 Harbour Park Drive****Midlothian, VA 23112****(804) 739-3700 Fax: (804) 739-2550**

**NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED
STATES TRUSTEE
PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND
CLERK'S CM/ECF POLICY 9**

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

February 18, 2015*Date***/s/ Pia J. North****Pia J. North 29672***Signature of Attorney*

North & Associates, P.C.
5913 Harbour Park Drive
Midlothian, VA 23112

Bob Blake Appraisal Co
2070 Moseley Rd
Moseley, VA 23120

CJW Medical Center
P. O. Box 99400
Louisville, KY 40269

Advance Orthopaedic Centers
7858 Shrader Rd
Henrico, VA 23294

Bon Secours
P.O. Box 28538
Richmond, VA 23228

CJW Medical Center
P.O. Box 13620
Richmond, VA 23225

AMCA
PO Box 1235
Elmsford, NY 10523

Capital 1 Bank
Po Box 85520
Richmond, VA 23285

CJW Medical Center
PO Box 99587
Louisville, KY 40269

American Express
P.o. Box 981537
El Paso, TX 79998

Capital 1 Bank
Attn: General Correspondence
Po Box 30285
Salt Lake City, UT 84130

Colorado Student Loan/College Assis
3015 S. Parker Rd, Ste 425
Aurora, CO 80014

American Express
Po Box 3001
16 General Warren Blvd
Malvern, PA 19355

Capital One Auto Finance
3901 Dallas Pkwy
Plano, TX 75093

Comenity Capital Bank
PO Box 182025
Columbus, OH 43218

Argent Federal Credit
11651 Alliance Circle
Chester, VA 23831

Capital One Auto Finance
3905 N Dallas Pkwy
Plano, TX 75093

Commonwealth of VA-Tax
P.O. Box 2156
Richmond, VA 23218-2156

Argent Federal Credit
5403 Jefferson Davis Hwy
Richmond, VA 23234

Dr. Robert P. Castellucci, MD
PO Box 247
Midlothian, VA 23113

Credit Adjument Board
306 East Grace St
Richmond, VA 23219

ARS National Services Inc
PO Box 469046
Escondido, CA 92046

Chesterfield County - PP Taxes
Richard A. Cordle, Treasurer
Post Office Box 26585
Richmond, VA 23285-0088

Credit Adjustment Board
306 East Grace Street
Richmond, VA 23219

BB&T
Collections Support Unit
Post Office Box 2322
Lumberton, NC 28359

Chesterfield Imaging Center
P.O. Box 13342
Richmond, VA 23225

Credit Adjustment Board
8002 Discovery Drive
Ste 311
Henrico, VA 23229

BCC Financial Managment
PO Box 590067
Fort Lauderdale, FL 33359

Chippenham Hospital, Inc.
7101 Jahnke Road
Richmond, VA 23225

Credit Collection Services
Two Wells Ave
Newton Center, MA 02459

Case 1:15-cv-01174-KRH
Dermatology Assoc of VA
301 Concourse Blvd
Ste 190
Glen Allen, VA 23059

Doc 12 Filed 03/19/15 Entered 03/19/15 14:23:20
Lab Corp Document Page 46 of 51
P.O. Box 2240
Burlington, NC 27216

Professional Acct Mgmt In
Pam Po Box 391
Milwaukee, WI 53201

Dermatology Assoc. of VA
10710 Midlothian Turnpike
#401
Richmond, VA 23235

Lafayette, Ayers & Witlock
10160 Staples Mill Road
Suite 105
Glen Allen, VA 23060

Radiology Assoc of Richmond
2602 Buford Rd
Richmond, VA 23235

Edward S. Whitlock
10160 Staples Mill Road
Suite 105
Glen Allen, VA 23060

Midland Cred
8875 Aero Dr Suite 200
San Diego, CA 92123

Radiology Assoc of Richmond
PO Box 13343
Richmond, VA 23225

FIA Card Services
PO Box 15019
Wilmington, DE 19850

Midland Credit Mgmt In
8875 Aero Dr
San Diego, CA 92123

B. Thomas Reams, MD
2229 Magnolia Grove Way
Midlothian, VA 23113

Focus Recovery Solutions
Attn: Bankruptcy
9701 Metropolitan Court Ste B
Richmond, VA 23236

MiraMed Revenue Group
PO Box 404893
Atlanta, GA 30384

Receivable Management
PO Box 8630
Richmond, VA 23226

Focused Recovery
9701 Metropolitan Court
Ste B
Richmond, VA 23236

OrthoVirginia
West End Orthopaedic Clinic
P.O. Box 35725
Richmond, VA 23235

RMCB
4 Westchester Plaza
Ste 110
Elmsford, NY 10523

Focused Reovery Solutions
9701 Metropolitan Court
Ste B
Richmond, VA 23236

Pinnacle Credit Service
Attn: Bankruptcy
Po Box 640
Hopkins, MN 55343

Shapiro & Brown, LLP
10021 Balls Ford Rd
Ste 200
Manassas, VA 20109

Glasser & Glasser, P.L.C.
P. O. Box 3400
Norfolk, VA 23514

Professional Emerg Care
2987 Momentum Pl
Chicago, IL 60689

Shapiro & Brown, LLP
236 Clearfield Ave
Ste 215
Virginia Beach, VA 23462

Horizon Financial Management
8585 S. Broadway Suite 880
Merrillville, IN 46410

Professional Recovery Con
PO Box 51187
Durham, NC 27717

Spinella, Owings & Shaia
8550 Mayland Drive
Richmond, VA 23294-4704

Internal Revenue Service
Centralized Insolvency Unit
P O Box 7346
Philadelphia, PA 19101-7346

Professnl Acct Mgmt In
633 W Wisconsin Av
Milwaukee, WI 53203

St Francis Emergency Assoc
PO Box 79214
Baltimore, MD 21279-0214

Texas Guaranteed Loan
PO Box 83100
Round Rock, TX 78683

Wells Fargo Bank Nv Na
Po Box 31557
Billings, MT 59107

Texas Guaranteed Student Loan
1609 Centre Creek Drive
Austin, TX 78761

Wells Fargo Bank Nv Na
Attn: Deposits Bankruptcy MAC# P6103-05K
Po Box 3908
Portland, OR 97208

Tx Guar Std
Tg/Attn. Bankruptcy Department
Po Box 659602
San Antonio, TX 78265

Wells Fargo Hm Mortgage
8480 Stagecoach Cir
Frederick, MD 21701

Van Ru Credit Corp
11745 W Bradley Rd
Milwaukee, WI 53224

Verizon
P.O. Box 3397
Wilmington, IL 61702

Verizon
500 Technology Dr Ste 30
Weldon Spring, MO 63304

Verizon Wireless
Post Office Box 17464
Baltimore, MD 21297-1464

Virginia Emer Phys LLP
75 Remittance Drive
Ste 1151
Chicago, IL 60675

Virginia Emergency Phys LLP
75 Remittance Drive
Ste 1151
Chicago, IL 60675

Fill in this information to identify your case:

Debtor 1 Bruno A. Tarabocchia

Debtor 2 Sarah C. Tarabocchia
(Spouse, if filing)

United States Bankruptcy Court for the: Eastern District of Virginia

Case number 15-31174
(if known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- ☒ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☐ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☒ 3. The commitment period is 3 years.
- ☐ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 8,000.00	\$ 0.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	\$ 0.00
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	\$ 0.00

Debtor 1
Debtor 2

Bruno A. Tarabocchia
Sarah C. Tarabocchia

Case number (if known)

15-31174

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00
8. Unemployment compensation	\$ 0.00	\$ 0.00
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:		
For you	\$ 0.00	
For your spouse	\$ 0.00	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0.00	\$ 0.00
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.		
10a.	\$ 0.00	\$ 0.00
10b.	\$ 0.00	\$ 0.00
10c. Total amounts from separate pages, if any.	+ \$ 0.00	\$ 0.00
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 8,000.00	+ \$ 0.00 = \$ 8,000.00
		Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ 8,000.00

13. Calculate the marital adjustment. Check one:

☐ You are not married. Fill in 0 on line 3d.

☒ You are married and your spouse is filing with you. Fill in 0 in line 13d.

☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13d.

13a. \$

13b. \$

13c. +\$

13d. Total \$ 0.00

Copy here=> 13d. - 0.00

14. Your current monthly income. Subtract line 13d from line 12. 14. \$ 8,000.00

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> 15a. \$ 8,000.00

Multiply line 15a by 12 (the number of months in a year).

15b. The result is your current monthly income for the year for this part of the form. 15b. \$ 96,000.00

Debtor 1
Debtor 2

Bruno A. Tarabocchia
Sarah C. Tarabocchia

Case number (if known)

15-31174

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live.

VA

16b. Fill in the number of people in your household.

5

16c. Fill in the median family income for your state and size of household.

16c. \$ 99,959.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Disposable Income* (Official Form 22C-2).

17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. Copy your total average monthly income from line 11 .

18. \$ 8,000.00

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d.

If the marital adjustment does not apply, fill in 0 on line 19a.

19a. -\$ 0.00

Subtract line 19a from line 18.

19b. \$ 8,000.00

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b

20a. \$ 8,000.00

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

20b. \$ 96,000.00

20c. Copy the median family income for your state and size of household from line 16c

\$ 99,959.00

21. How do the lines compare?

☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Bruno A. Tarabocchia

Bruno A. Tarabocchia
Signature of Debtor 1

Date **February 18, 2015**

MM / DD / YYYY

X /s/ Sarah C. Tarabocchia

Sarah C. Tarabocchia
Signature of Debtor 2

Date **February 18, 2015**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 22C-2.

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1 **Bruno A. Tarabocchia**
Debtor 2 **Sarah C. Tarabocchia**

Case number (if known) **15-31174**

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **09/01/2014** to **02/28/2015**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Hoffman & Hoffman Inc.**

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: **\$64,878.16** from check dated **8/31/2014** .

Ending Year-to-Date Income: **\$96,878.16** from check dated **12/31/2014** .

This Year:

Current Year-to-Date Income: **\$16,000.00** from check dated **2/28/2015** .

Income for six-month period (Current+(Ending-Starting)): **\$48,000.00** .

Average Monthly Income: **\$8,000.00** .